Agency Report of: Public Official Appointments

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						ublic Document			
1.	Agency Name					California 806			
	City of Burbank				Form OUO For Official Use Only				
	Division, Department, or Reg	ivision, Department, or Region (If Applicable)							
	City Council	ty Council ,							
	Designated Agency Contact	esignated Agency Contact (Name, Title)							
	Emily Gabel-Luddy, City Co	uncil			Date Posted:				
	Area Code/Phone Number	ea Code/Phone Number E-mail				6/3/19			
	818-238-5751	EGabel-Luddy@burbankca.gov		Page 1 of		(Month, Day, Year)			
2.	Appointments				7,11				
	Agency Boards and Commissions	Name of Appointed Person		Appt Date and Length of Term	Per Me	eting/Annual Salary/Stipend			
,	Southern California Association of Governments (SCAG)	Talamantes, Jess A. (Last, First) Gabel-Luddy, Emily (Last, First)		6 / 12 / 18 Appl Date /ear 6 months Length of Term	▶ Per Meeting: \$ 120.00 ▶ Estimated Annual: \$0-\$1,000 \$2,001-\$3,000 ☒ \$1,001-\$2,000 ☐ Other				
		Name(Last, First) Alternate, if any(Last, First)	<u>-</u>	Appt Date Length of Term	▶ Per Meeting: \$				
		▶Name(Last, First) Alternate, if any(Last, First)	<u>-</u>	Appt Date Length of Term	▶ Estima. \$0-\$1	ted Annual: ,000			
		▶Name(Last, First) Alternate, if any(Last, First)	-	Appt Date Length of Term					
	Signature of Agency Head or Designed	Emily Gabel-Luddy Print Name nded till December 2019.	mation	identified above is true Mayor Title	e to the bes	st of my information and belief. (Month, Day, Year)			